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DEWINE TRANS	CIVIT	TAL E		Application No.	09/54	09/541,667			
TRANSMITTAL FORM (to be used for all correspondence after initial filing)			Filing Date	Marc	h 31, 2000 RECEIV				
			First Named Inventor	Carl	M. Ellison				
				Art Unit	2134	APR 2 1 20			
				Examiner Name	Tong	oc Tran Technology Cent			
Total Number of	Pages in	This Submission	on 20	Attorney Docket Number	er 4239	0P8629			
		ENCLOS	SURES (chec	k all that apply)					
Fee Transmittal	l Form	•	Drawing(s)			After Allowance Communication to Group			
Fee Attac	ched		Licensing-related Papers			Appeal Communication to Board of Appeals and Interferences			
Amendment / R	Response		Petition			Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)			
After Final Affidavits	al s/declarat	ion(s)	Petition to Convert a Provisional Application			Proprietary Information			
Extension of Tir	me Reque	est	Power of Attorney, Revocation Change of Correspondence Address			Status Letter			
Express Abandonment Request			Terminal Disclaimer			Other Enclosure(s) (please identify below):			
Information Disclosure Statement			Request for	r Refund					
PTO/SB/	08		CD, Numbe	er of CD(s)					
Certified Copy of Priority Document(s)									
Response to Missing Parts/ Incomplete Application			Remarks	<u> </u>					
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Declaration/POA  Response to Missing Parts under 37 CFR 1.52 or 1.53									
1.52 or 1.	.53		OF APPLICAN	IT, ATTORNEY, OR A	GENT				
Firm	Thir			<del></del>	11				
or	Thinh V. Nguyen, Reg. No. 42,034								
	ALAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP								
Signature	$\square \mathcal{U}$	Show	n_						
Date April 14, 2004									
		CERTIFIC	CATE OF MAIL	ING/TRANSMISSION					
	first class					on the date shown below with Patents, P.O. Box 1450,			
Typed or printed na		Γu T. Nguyer	1						
Signature		Tuna	uen_		Date	April 14, 2004			

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## EE TRANSMITTAL for FY 2004

Effective 01/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT

Application Number	09/541,667
Filing Date	March 31, 2000
First Named Inventor	Carl M. Ellison RECEIVE
Examiner Name	Tongoc Tran
Art Unit	2134
Attomey Docket No.	42390P8629 APR 2 1 2004

Complete if Known

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continuenth in Including Center 2								
	Charles Configured Money Cother Disease					3. ADDITIONAL FEES						
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Deposit	$\overline{}$						1052	50	2052	25	Surcharge - late provisional filing fee or	
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to the at	bove-id	entified d					1251	110	2251	55	Extension for reply within first month	
				ALCULATIO	N		1252	420	2252	210	Extension for reply within second month	
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Large Entity		Small I					1254	1,480	2254	740	Extension for reply within fourth month	
	Fee (5)	Fee Code	Fee (\$)	Fee Description		Fee Paid	1255	1,210	2255	605	Extension for reply within fifth month	· · · · · · · · · · · · · · · · · · ·
	770	2001	385	Utility filing fee			1404	330	2401	165	Notice of Appeal	
	340	2001	170	Design filing fee	9	$\vdash$	1402	330	2402	165	Filing a brief in support of an appeal	
	530	2003	265	Plant filing fee	•		1403	290	2403	145	Request for oral hearing	
	770	2004	385	Reissue filing fe	ee	$\vdash$	1451	1,510	2451	1,510	Petition to institute a public use proceeding	<del></del>
	160	2005	80	Provisional filing			1452	110	2452	55	Petition to revive - unavoidable	
	i		01101		La.		1453	1,330	2453	665	Petition to revive - unintentional	
SUBTOTAL (1) (\$)				1501	1,330	2501	665	Utility issue fee (or reissue)				
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	_			Claims	below	Fee Paid	1503	640	2503	320	Plant issue fee	<del></del>
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	66	Fee	Fee	Fee Description							property (times number of properties)	
	\$)	Code	(5)	Olahan in austria	-4.00		1809	770	1809	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
	18	2202 2201	9	Claims in excess			1810	770	2810	385	For each additional invention to be	
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patent				1802	900	1802	900	Request for expedited examination				
1205 18 2205 9 **Reissue claims in excess of 20 and over original patent					Other fee (specify)		_	of a design application				
SUBTOTAL (2) (S)						*Reduced by Basic Filing Fee Paid		-	SUBTOTAL (3) (\$)			
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**or number previously paid, if greater, For Reissues, see below												